Marine Resources ELVEREXPORTER2016

Please provide all information requested. Delays may result from incomplete applications.



Part A: Applicant Information	
Business Name:	
Fed Employer ID#:	
If a corporate entity, please	fill out the primary ownership in Part E on the back of this
Application	
Mailing Address of Busine	ess:
City:	State: Zip Code:
=	Cell Phone: ()
Landline: ()	Cen i none. ()
Landline: () E-mail:	· · · ·

Fees
Fees

LICENSE FEES ARE NOT REFUNDABLE.

ElverExporter

Fee \$5000

Part C: Vehicle Information

Please complete for vehicle to be licensed to transport elvers:

s this vehicle owned___leased____rented____?

f leased or rented send a copy of the lease or rental agreement.

Registration # _____Make _____Vehicle ID No._____

Model _____ Year ____ Color _____

Part D: Certification

I hereby declare that the foregoing information is true and correct. <u>Making any false statement on this license application is punishable under Title 17-A MRS section 453.</u>

Signature______Date__/__/_

(Owner or an Authorized Official of the Firm) (Month/Day/Year)

Please Print Name

Under Title 12, §6306, (1)(2) and (3), a person licensed by the Department of Marine Resources has a duty to submit to inspection, search and seizure by a Marine Patrol Officer. Failure to comply with this duty may result in a license suspension.

§6306. Consent to inspection

- 1.Consent to inspection. Any person who signs an application for a license or aquaculture lease or receives a license or aquaculture lease under this Part has a duty to submit to inspection and search for violations related to the licensed activities by a marine patrol officer under the following conditions.

 A. Watercraft or vehicles and the equipment located on watercraft or vehicles used primarily in a trade or business requiring a license or aquaculture lease under this Part may be searched or inspected at any time.
 - B. Any other location where activities subject to this Part are conducted may be inspected or searched during the hours when those activities occur.
 - C. A location specified in paragraph B may be inspected at any time if a marine patrol officer has a reasonable suspicion of a violation of this Part. D. No residential dwelling may be searched without a search warrant unless otherwise allowed by law.
- 2. Seizure of evidence. Any person who signs an application for a license or aquaculture lease or receives a license or aquaculture lease under this Part has a duty to permit seizure of evidence of a violation of marine resources laws found during an inspection or search.
- 3. Refusal. Refusal to permit inspection or seizure is a basis for suspension of any or all licenses under this chapter or revocation of aquaculture leases.

Part E: Primary ownerinformation required.							
For Corporations with six or fewer sha							
Last Name	First Name	DOB	SS#	%			
Last Name	First Name	DOB	SS#	%			
Last Name	First Name	DOB	SS#	%			
Last Name	First Name	DOB	SS#	<u>%</u>			
Last Name	First Name	DOB	SS#	<u>%</u>			
Last Name	First Name	DOB	SS#	%			
For Corporations with greater than six shareholders, please identify Agent's name that is listed on your corporation documents.							
Last Name	First Name		_, Address				
City	, State		, Phone #				

INSTRUCTIONS:

Complete the information in **Part A** on the front of this form. Check license(s) requested in **Part B** and calculate the total fees. Fill out all applicable information in Part C. Read the **residency requirements** included on this document if applying for Marine Worm Dealer license. **Certify your application with your signature in Part D.** Enclose this document in an envelope along with a check or money order payable to **Treasurer**, **State of Maine** or fill out the section below for credit card payments, affix a stamp and put it in the mail. **We cannot accept applications by fax or phone.** If you have questions, call (207) 624-6550.

Mail to:
Licensing Division
Department of Marine Resources
21 State House Station
Augusta, ME 04333

Please make all checks payable to: Treasurer State of Maine

Credit/debit card payments: I authorize the VISA □ MasterCard □ Discover □	e State of Maine, Department of Marine Resources, Licensing Division, to char Debit card	ge my
First Name	Last Name ASE PRINT LEGIBLY AS THIS MAY AFFECT PROCESSING OF APPLICATION	
Card No	, CVV#expiration date	
Signature of Cardholder:	Date:	

Your credit card will be charged for what you have applied for on this application